

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Office Use Only
U.S. Dept. of Labor
B
OLMS DATA

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 1254C	2. Fiscal Year Covered From: 1 / 1 / 04 Through: 12 / 31 / 04
3. Name and address of person filing. Name VINCENT A PANVINI P.O. Box, Bldg., Room No., if any Street 1750 NEW YORK AVE NW City WASHINGTON State DC ZIP Code + 4 20006-5986	4. Name, file number, and address of labor organization. Name SHEPHERD WORKERS INTERNATIONAL ASS Labor Organization File Number 0073 P.O. Box, Building and Room Number, if any Street 1750 NEW YORK AVE NW City WASHINGTON, DC 20006 State DC ZIP Code + 4 20006-5986
5. Position in labor organization. DIRECTOR OF GOVERNMENTAL AFFAIRS	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. NONE 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Vincent A Panvini

On

8/17/05
Date

202-663-0887
Telephone Number

Name of Person Filing

VINCENT A PANVINI

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name NATIONAL ENERGY MANAGEMENT INSTITUTE

Trade Name, if any. NEMI

P.O. Box, Bldg., Room No., if any

Street 601 N. FAIRFAX STREET

City ALEXANDRIA

State VIRGINIA ZIP Code + 4 22314

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

NEMI IS JOINT LABOR-MANAGEMENT COMM
DEALING IN DOU. AIR QUALITY, IDENTIFYING
NEW MARKETS AND EMPLOYMENT OPPORTUNITIES
FOR SHEET METAL WORKERS INTERNATIONAL
ASSOCIATION AND SHEET METAL + AIR
CONDITIONING CONTRACTORS NATIONAL
ASSOCIATION - SMWIA + SMACNA IS
IDENTIFYING NEW TECHNOLOGY FOR THE INDUSTRY

11.b. Approximate dollar value of such dealing.

0

12.a. Nature of interest held or income received.

4 DINNER MEETINGS WITH NEMI
ON 3/23/04 - 4/20/04 - 9/3/04 - 11/29/04
IN WASHINGTON DC

12.b. Amount.

\$ 549.60

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name DALEY AND GEORGE LTD

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 20 SOUTH CLARK ST

City CHICAGO

State ILLINOIS ZIP Code + 4 60603

14.a. Nature of payment.

DINNER/CRUISE - 9/19/2004 AT
SMWIA GENERAL CONVENTION IN
CHICAGO, ILL.

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment

\$ 177.00

(2)

Name of Person Filing

VINCENT A PANVINI

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business; of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name NATIONAL CENTER FOR ENERGY MANAGEMENT AND BUILDING TECHNOLOGIESTrade Name, if any: NCEMBT

P.O. Box, Bldg., Room No., if any

Street 601 N. FAIRFAX STREET SUITE 250City ALEXANDRIAState VIRGINIA ZIP Code + 4 22314

9. Business deals with.

☒ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name NATIONAL ENERGY MANAGEMENT INSTITUTETrade Name, if any: NEMI

P.O. Box, Bldg., Room No., if any

Street 601 NORTH FAIRFAX STREETCity ALEXANDRIAState VIRGINIA ZIP Code + 4 22314

11.a. Nature of such dealing.

NCEMBT, INDEPENDENT, NON PROFIT RESEARCH INSTITUTION THAT SUPPORTS RESEARCH, AND PARTICIPATES IN STANDARD SETTING, ADVANCES TECHNICAL TRAINING AND PROFESSIONAL EDUCATION AND SERVES AS A REPOSITORY OF INFORMATION ON ECONOMIC, TECHNICAL AND PUBLIC POLICY ISSUES.

11.b. Approximate dollar value of such dealing.

0

12.a. Nature of interest held or income received.

CONFERENCE IN LAS VEGAS NEVADA 10/7/04 - 10/10/04 - HOTEL, MEALS, AIRFARE AND TRANSPORTATION

12.b. Amount.

921.70

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name MISEAU FINANCIAL

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 350 NORTH CUMMIS STREETCity CHICAGOState ILLINOIS ZIP Code + 4 60610

14.a. Nature of payment.

DINNER/CRUISE 8/17/05 AND BRASS TELESCOPE \$205 + \$21 AT SMU'S GENERAL CONVENTION

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment.

\$226.00

(3)

Name of Person Filing

VINCENT A PAVINI

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name PHARMACEUTICAL INDUSTRY LABOR-MANAGEMENT ASSOCIATION

Trade Name, if any: PILMA

P.O. Box, Bldg., Room No., if any

Street 1029 NORTH ROYAL STREET-SUITE 350

City ALEXANDRIA

State VIRGINIA ZIP Code + 4 22314

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

PILMA WORKING TOGETHER ON LEGISLATIVE, REGULATORY, OTHER KEY ISSUES AFFECTING PHARMACEUTICAL AND LABOR IN NATIONAL INTEREST. FIND COMMON GROUND + MUTUAL BENEFIT, INVESTIGATE ISSUES AFFECTING ACCESS TO AFFORDABILITY OF MEDICINES, MAINTAINING STRONG STATESIDE EMPLOYMENT AND RESEARCH LEADERSHIP FOR US INDUSTRY. COOPERATION ON PREVENTION OF DISEASE TO DEATH RESULTING FROM BOTTLENECK BARRIERS AGAINST AMERICAN WORKERS WITHIN

11.b. Approximate dollar value of such dealing.

0

12.a. Nature of interest held or income received.

TWO CONFERENCES 5/20/04 to 5/22/04
HILTON HEAD ISLAND - HILTON HOTEL.
NOVEMBER 16TH TO NOVEMBER 19TH 2004
HALLANDALE BEACH FLORIDA. INCLUDING
HOTEL, MEALS, AIRFARE AND TRANSPORTATION
FOR THE TWO CONFERENCES

12.b. Amount.

\$2,482.89

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment

(4)

Name of Person Filing

VINCENT A PANVINI

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business; of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ALLIANCE FOR RESPONSIBLE USE OF CHEMISTRYTrade Name, if any: ARCC

P.O. Box, Bldg., Room No., if any

Street 1030 VERMONT AVE N.W.City WASHINGTONState DC ZIP Code + 4 20005

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

ARCC IS LABOR-MANAGEMENT COMMITTEE ADDRESSES HEALTH, SAFETY + ENVIRONMENTAL CONCERNS WITH THE SCIENTIFIC COMMUNITY TO ENSURE CHEMICALS + PRODUCTS CONTINUE TO PROVIDE JOBS AND NUMEROUS BENEFITS TO SOCIETY. TO RESOLVE UNTAILING OF PROGRAMS OF EDUCATION AND ADVOCACY REGARDING THE RESPONSIBLE APPLICATIONS OF CHEMICAL CHEMISTRY.

11.b. Approximate dollar value of such dealing.

0

12.a. Nature of interest held or income received.

TWO LUNCH COMMITTEE MEETINGS IN WASHINGTON, D.C. 7/14/04 - \$33.00 AND 12/22/04 - \$84.40

12.b. Amount.

\$ 117.40

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing

VINCENT A PANVINI

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name AMALUAMATED BANK CHICAGO

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street ONE WEST MONROECity CHICAGOState ILLINOISZIP Code + 4 60603

9. Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

BANK THATS OPENS CREDIT CARDS
TO STREET METAL WORKERS AND
THEIR FAMILIES

11.b. Approximate dollar value of such dealing.

0

12.a. Nature of interest held or income received.

SPONSORED TICKETS AND FOOD FOR
BASEBALL GAME IN CHICAGO AT
OUR SMMA GENERAL CONVENTION
IN AUGUST 2004

12.b. Amount.

\$104.00

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer



or Consultant



?

14.b. Amount of payment



SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION

1750 New York Avenue, N.W.
Washington, D.C. 20006-5386
Phone: (202) 783-5880
Phone: (202) 662-0887
Fax: (202) 662-0880



VINCENT A. PANVINI
Director of Governmental Affairs

August 11, 2005

U.S. Department of Labor
Employment Standards Administration
Office of Labor-Management Standards
200 Constitution Ave., NW, Room N-5616
Washington, DC 20210

Dear OLMS:

Attached please find my completed and executed LM-30 report for 2004. The information contained in the LM-30 report is based on my best effort to make a good-faith reconstruction of events occurring in 2004. If I subsequently recall any additional reportable details, I will prepare and file an amended LM-30 report.

Sincerely,


Vincent A. Panvini
Director of Governmental Affairs

VAP/jag

Attachment